

PERFORMANCE AND QUALITY IMPROVEMENT

Quarterly Report



Fourth Quarter 2018

INTRODUCTION

Welcome to MHCO's PQI Quarterly Report! This report is for all stakeholders including residents, personnel, community members, board members, donors, and any individual interested in the great work that we do. PQI – Performance and Quality Improvement – is an integral part of MHCO. We are open and willing for new opportunities to grow. We hope this report demonstrates our commitment to the residents we serve, our transparency for when things don't go as well as planned, and desire to receive feedback from others. If you have ideas on how this document can be improved, please let us know!

We seek to learn from our experiences and grow. As you read through this report, when you see progress that is not up to our expectations, there will always be a plan for how to address the challenge. Being able to take ownership of our shortcomings and work to improve them is an underlying philosophy of our organization.

Our outputs are simple numeric measurements of productivity. The outputs do not necessarily mean that the residents are achieving desired outcomes, but do mean that personnel provided a certain number of services to a certain number of people. You will notice that we use a simple icon system for our outputs:

A yellow sticky note means that still have work to do to meet reach the target.



A green arrow hitting the bullseye means we are at target or above.






Resident outcomes show sustainable change that demonstrates the interventions provided by MHCO work. Outcomes are measured over time. We are currently developing methods of tracking outcomes to identify any trends and determine ways to improve. Over the course of residency, it is our intention to increase life skills appropriate to each resident's development.

Additionally, resident records are reviewed quarterly to ensure that the records contain all required information to provide service. The record review is an opportunity to assess the quality of service delivery and ensure that confidential information remains confidential. Resident satisfaction is another very important to MHCO mission achievement and methods are being developed to determine satisfaction outcomes.

Goal 1
 Increase participation in community events and service projects that promote social responsibility and increase sustainability








On Target
 MHCO provided space and resources for organizations such as Granville County Board of Education, Girl Scouts, Boy Scouts, Zumba, Karate, Smart Start, Vance Granville Community College, and Masonic Lodges. Eller Cottage made blessing bags and participated in Central Children’s Home’s Christmas party. Kimel, Eller, and Alumni Cottages went Christmas Caroling at Whitestone. Residents made Christmas shoeboxes for Samaritan’s Purse. The Financial Development Assistant provided representation in community event planning meetings. The Administrator rang bells for Salvation Army through the Rotary Club.

- Target**
- At least one community event or service project held off campus per quarter 
 - Participation in each event by at least 3 personnel 
 - Participation in each event by at least 3 residents 

Work in Progress
 Monthly fire drills (including one nighttime drill) were conducted in all cottages. Employees of nonresidential buildings completed a fire drill with the average response time of 53 seconds. Employees and residents of all buildings conducted a lockdown drill (average for residential buildings response time 5 minutes and nonresidential buildings response time was 2 minutes 27 seconds).

Goal 2
 Increase familiarity with lockdown, weather, and fire emergency procedures to increase safety and security of residents and personnel

- Target**
- At least one lockdown drill per quarter 
 - At least one tornado drill per quarter
 - At least one fire drill per quarter for nonresidential buildings 
 - At least one fire drill per month for residential buildings (1 per quarter from midnight-6 am) 
 - Participation in each event by all personnel in the building 
 - Participation in each event by all residents in the building 

Plan
 Drills due were added to the MHCO 2019 calendar. Supervisor/clinicians will monitor KaleidaCare to ensure fire drills are completed as required.



Goal 3

Increase Direct Care census to meet licensed residential capacity

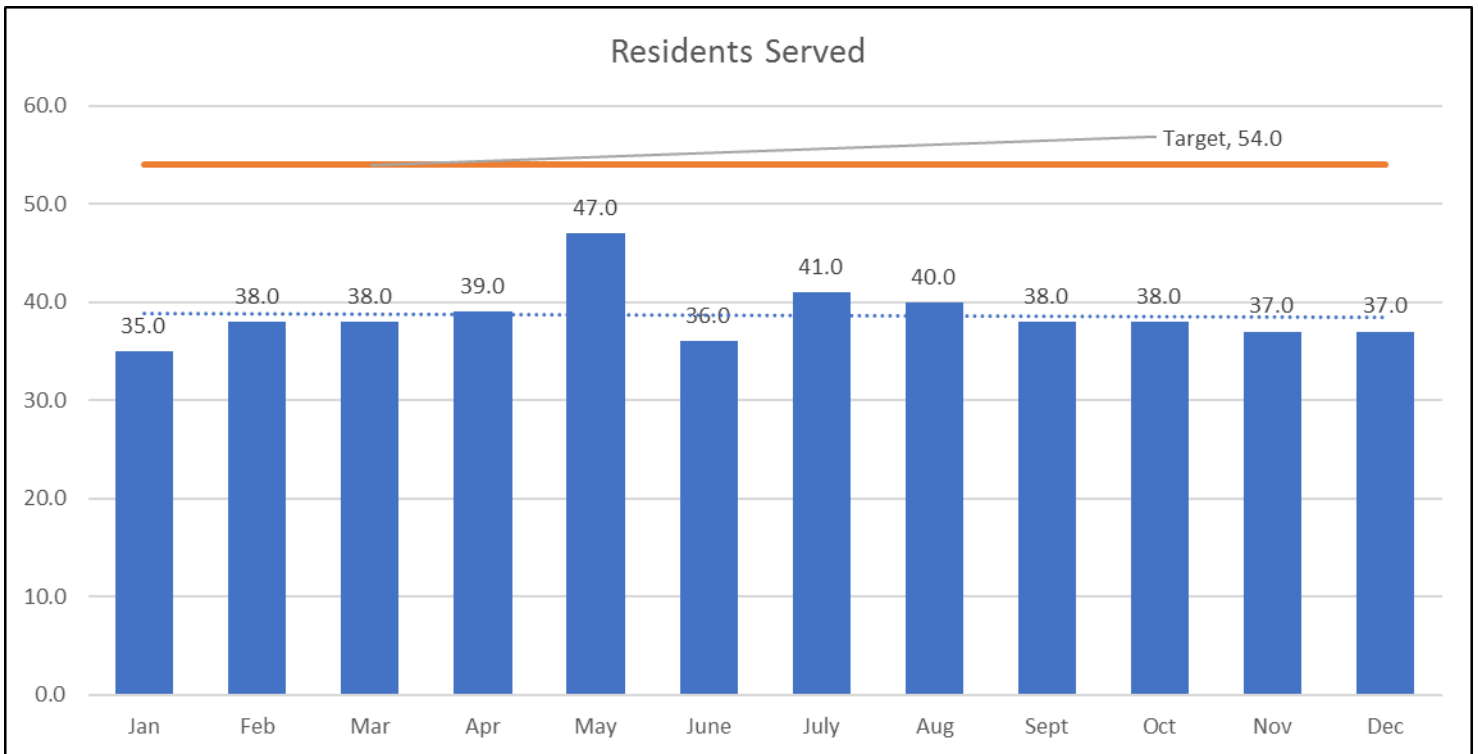
Work in Progress

1 Direct Care resident was admitted and 2 were discharged.



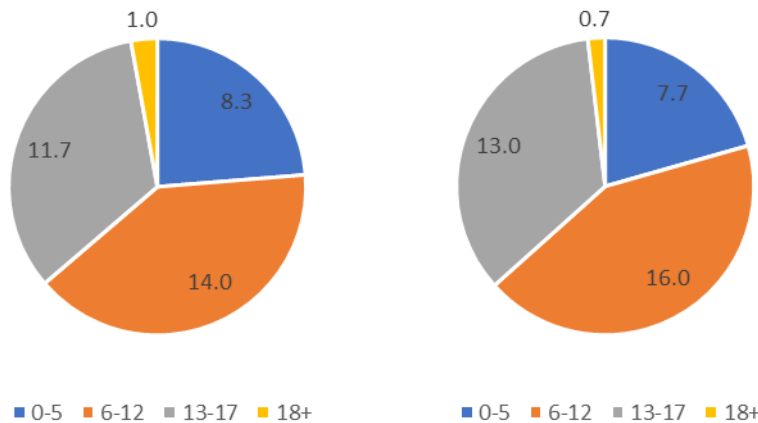
Target

- Average of 54 residents in Direct Care by December 31, 2018
- Increase census by an average of 4 appropriate residents in Direct Care quarterly
- Present program and service offerings to at least three groups quarterly



<i>Direct Care</i>	Oct	Nov	Dec	Q1 2018	Q2 2018	Q3 2018	Q4 2018	Q4 2017
Residents Served (total)	38.0	37.0	37.0	37.0 (avg)	40.7 (avg)	39.7 (avg)	37.3 (avg)	35.0 (avg)
Admissions (total)	0.0	0.0	1.0	6.0	12.0	14.0	1.0	1.0
Discharges (total)	0.0	1.0	1.0	1.0	13.0	13.0	2.0	5.0
Applications Received (total)	3.0	0.0	4.0	8.0	7.0	16.0	7.0	7.0
Applications Sent (total)	5.0	3.0	5.0	14.0	21.0	14.0	13.0	6.0
Number of Placement Calls (total)	19.0	14.0	18.0	32.0	52.0	35.0	51.0	31.0
Length of stay (avg)	1036.33	1106.24	1106.24	989.7	904.2	836.5	1082.9	1014.4
Deferrals (total)	2.0	0.0	1.0	3.0	1.0	1.0	3.0	7.0

Quarter 4 2017 Quarter 4 2018
 Direct Care Age Distribution Direct Care Age Distribution



<i>Ethnicity and Gender</i>	Oct	Nov	Dec	Q1 2018 (%)	Q2 2018 (%)	Q3 2018 (%)	Q4 2018 (%)	Q4 2017 (%)	Deferred	Discharged
African-American (total)	18.0	18.0	17.0	43.2%	47.4%	49.5%	47.4%	43.7%	1.0	1.0
Caucasian (total)	12.0	11.0	11.0	43.2%	36.0%	30.2%	30.4%	42.9%	2.0	1.0
Hispanic (total)	0.0	0.0	0.0	0.0%	0.0%	0.0%	0.0%	0.0%	0.0	0.0
Multi-Racial (total)	8.0	8.0	9.0	13.5%	15.6%	20.2%	22.3%	14.3%	0.0	0.0
Male (total)	20.0	20.0	20.0	59.5%	54.1%	52.9%	53.6%	57.1%	1.0	0.0
Female (total)	18.0	17.0	17.0	40.5%	45.9%	47.1%	46.5%	42.9%	2.0	2.0

<i>Custody</i>	Oct	Nov	Dec	Q1 2018 (%)	Q2 2018 (%)	Q3 2018 (%)	Q4 2018 (%)	Q4 2017 (%)
Parents	36.0	36.0	36.0	83.8%	87.9%	49.5%	96.5%	85.7%
Self	2.0	1.0	1.0	5.4%	3.2%	30.2%	3.6%	1.7%
DSS	0.0	0.0	0.0	10.8%	6.4%	0.0%	0.0%	12.3%

Plan

Program staff are developing marketing materials. Brochures will specifically market to potential families and include family testimonials. Program staff have reached out to additional resources (e.g. DSS offices and schools) to help market services. Information booths will be scheduled at events and conferences to speak to the public and other professionals about the program for recruitment of residents and staff. School visits are being planned to start February 2019. Presentations to potential resources are in development and will be shared with the Marketing Committee of the Board of Directors.

Work in Progress


Academic Support was provided to all Direct Care school aged residents. SGA provided 1 internship in the fourth quarter 2018. One Direct Care resident education on gratitude was offered (68.4% in attendance).



Goal 4

Increase skills and opportunities through participation in educational experiences

Target

- 95% of available Direct Care residents attending resident education offered on campus quarterly
- 95% of available ILP residents attending resident education offered on campus quarterly
- 65% of available ILP residents attending educational program off campus quarterly
- At least one internship provided by SGA per quarter 

<i>Report Cards</i>	1st 9 weeks 2017-18	2nd 9 weeks 2017-18	3rd 9 weeks 2017-18	4th 9 weeks 2017-18
Honor Roll (% of residents in school)	33.3%	21.6%	21.2%	24.1%
Honorable Mention (% of residents in school)	24.2%	16.2%	21.2%	21.4%
GPA Increase 5% or more out of 100% in a subject (% of residents in school)	21.2%	13.5%	6.1%	8.0%
Maintained 90+ GPA (% of residents in school)	0.0%	2.7%	6.1%	0.0%
Direct Care Campus GPA out of 100% (avg)	81.3	81.8	81.3	78.6

Plan

Resident education has been planned bimonthly for 2019.

<i>Independent Living Program</i>	Oct	Nov	Dec	Q1 2018	Q2 2018	Q3 2018	Q4 2018	Q4 2017
College (%)	66.7%	58.3%	60.0%	62.2%	56.5%	82.2%	61.7%	87.1%
GED (%)	0.0%	0.0%	0.0%	10.4%	6.5%	0.0%	0.0%	9.9%

Goal 5

Increase vocational skills through participation in Kid\$Earn and other work experiences

Work in Progress

An average of 7 Direct Care residents participated in Kid\$Earn (58.3% of those eligible). An average of 72.2% of eligible Direct Care residents were working at off campus job sites during the fourth quarter 2018. An average of 73.9% of eligible ILP residents were working at off campus job sites.

Target

- 65% of eligible Direct Care residents participating in Kid\$Earn quarterly
- 75% of eligible Direct Care residents working at off campus job sites quarterly
- 95% of eligible ILP residents working at off campus job sites quarterly



Plan

Changes to the Kid\$Earn program will begin in the summer to include more work to improve resident motivation and willingness to participate depending on availability.

<i>Employment</i>	Oct	Nov	Dec	Q1 2018	Q2 2018	Q3 2018	Q4 2018	Q4 2017
Kid\$Earn (% eligible)	50.0%	58.3%	66.7%	nd	56.5%	75.7%	58.3%	nd
Direct Care off campus employment (% eligible)	83.3%	83.3%	50.0%	66.7%	38.8%	44.4%	72.2%	66.7%
ILP employment (% eligible)	66.7%	75.0%	80.0%	79.4%	94.3%	83.9%	73.9%	69.9%

Goal 6

Improve program advancement based on achievement of independent living skills



Work in Progress

4 Direct Care residents experienced cottage moves. 1 cottage experienced primary and alternate CCW changes. 0.0% of Direct Care annual assessments were completed within 10 days of due date in the third quarter 2018. 78.6% of Child and Family Team meetings were completed within 10 days of due date. 100.0% of Direct Care Individualized Service Plans were completed within 10 days of due date. 50.0% of ILP Individualized Service Plans were completed within 10 days of due date.

Plan

Cottage moves will occur through Child and Family Team meetings or Direct Care staffing. Paperwork is being tracked by the Program Director to ensure timely documentation. Skills needed to be promoted for advancement to a new cottage have been drafted. After review, residents and staff will incorporate skills into Individualized Service Plans.

Target

- 95% of cottage moves occur as planned based on achievement of independent living skills necessary for promotion quarterly
- 95% of annual assessments occur within 10 days of due date quarterly
- 95% of Child and Family Team meetings occur within 10 days of due date quarterly 🎯
- 95% of Individualized Service Plans are completed within 10 days of due date quarterly 🎯

On Target


100.0% of eligible ILP residents (5 residents out of 5 eligible) participated in Driving Instruction Preparation Program and other driving practice activities.



Goal 7

Improve independent living skills through driving practice or education, obtaining a Driver's License, and access to transportation

Target

- 95% of eligible ILP residents completed or are participating in the Driving Instruction Preparation Program on campus or other driving practice or education quarterly 

<i>Independent Living Program Other Activities</i>	Oct	Nov	Dec	Q1 2018 (avg)	Q2 2018 (avg)	Q3 2018 (avg)	Q4 2018 (avg)	Q4 2017 (avg)
Transports given (total transports)	85.0	102.0	83.0	219.0	194.3	113.3	90.0	188.3
Residents with own car (total residents)	6.0	6.0	6.0	9.0	42.9%	65.4%	6.0	9.0
Wheels4Hope applications (total applications)	0.0	0.0	0.0	0.0	1.7	0.0	0.0	0.0

Goal 8

Increase annual giving to reduce reliance on planned gifts

Work in Progress

Compared to the fourth quarter of 2017, we have experienced a - 2.67% decrease in overall giving in the fourth quarter of 2018. In 2018, 56% of staff and 87% of the Board of Directors gave at least once to MHCO. 11.3% of all thank you notes were returned for address.



Target

- 10% increase in dollar amount of giving quarterly
- 25% increase in number of staff giving quarterly
- 25% increase in number of members of the Board of Directors giving quarterly
- 12 new donors giving a \$10 monthly recurring payment quarterly
- 95% of all thank you notes not returned for address

Plan

A Financial Development planning meeting took place in the fourth quarter 2018 to determine goals and strategies to achieve targets.

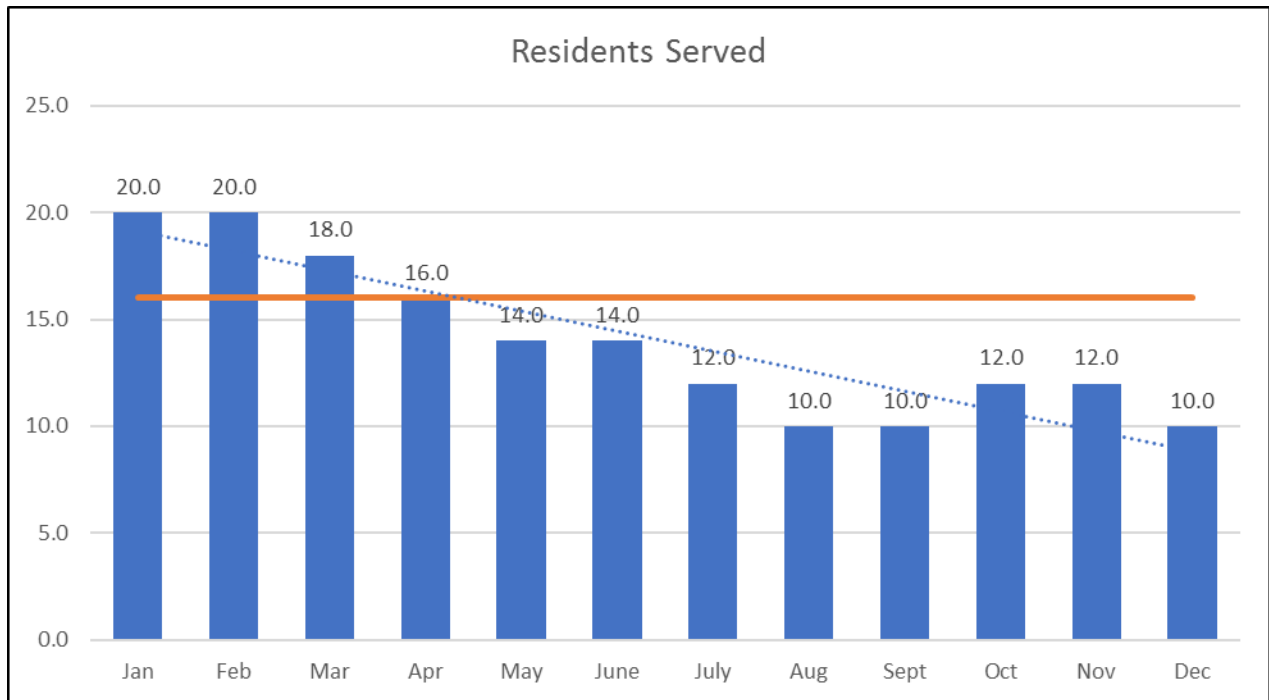
<i>Financial Development</i>	Oct	Nov	Dec	Q1 2018 (avg)	Q2 2018 (avg)	Q3 2018 (avg)	Q4 2018 (avg)
Staff Giving (%)	47.0%	52.0%	56.0%	40.0%	43.3%	47.0%	51.7%
Board of Directors Giving (%)	87.0%	87.0%	87.0%	31.0%	82.3%	87.0%	87.0%
Donors Giving \$10 Monthly Recurring (# donors)	47.0	47.0	47.0	33.0	44.7	47.0	47.0

DIRECT CARE

<i>Direct Care</i>	Oct	Nov	Dec	Q1 2018 (avg)	Q2 2018 (avg)	Q3 2018 (avg)	Q4 2018 (avg)	Q4 2017 (avg)
Medical Illnesses (total illnesses)	15.0	15.0	22.0	16.0	11.0	15.0	17.3	11.3
Medical Appointments (total appointments)	29.0	22.0	23.0	24.3	27.3	31.7	24.7	35.3
Medication Administration Record Controlled (% signed off daily)	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
Medication Administration Record Non-Controlled (% signed off daily)	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

<i>Direct Care Other Activities</i>	Oct	Nov	Dec	Q1 2018 (avg)	Q2 2018 (avg)	Q3 2018 (avg)	Q4 2018 (avg)	Q4 2017 (avg)
Wellness Participation (total residents)	325.0	171.0	110.0	281.7	386.0	264.7	202.0	242.3
Wellness activities (total)	22.0	16.0	11.0	15.7	20.7	16.0	16.3	17.7
Wellness Average Participation (average residents per activity)	14.8	10.7	10.0	17.9	18.7	16.3	11.8	13.7
Church Service Attendance (total residents)	79.0	87.0	61.0	83.7	87.3	111.3	75.7	94.7
Church Service Attendance (% residents per service)	52.0%	58.8%	82.4%	70.1%	49.7%	24.0%	64.4%	67.6%

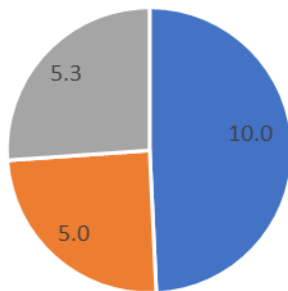
INDEPENDENT LIVING PROGRAM



<i>Independent Living Program</i>	Oct	Nov	Dec	Q1 2018	Q2 2018	Q3 2018	Q4 2018	Q4 2017
Residents Served (total)	12.0	12.0	10.0	19.3 (avg)	14.7 (avg)	10.7 (avg)	11.3 (avg)	20.3 (avg)
Admissions (total residents)	2.0	0.0	1.0	1.0	2.0	0.0	3.0	0.0
Discharges (total residents)	0.0	0.0	3.0	2.0	6.0	4.0	3.0	3.0
Applications Received (total)	0.0	0.0	1.0	0.0	2.0	0.0	1.0	0.0
Deferrals (total residents)	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0

Quarter 4 2017

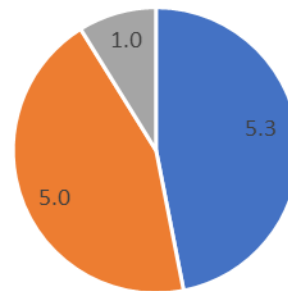
Independent Living Program Age Distribution



■ 18-19 ■ 20-21 ■ 22-23

Quarter 4 2018

Independent Living Program Age Distribution

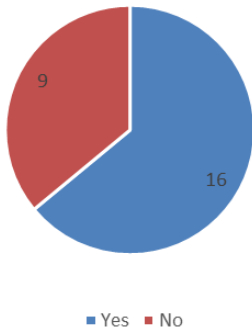


■ 18-19 ■ 20-21 ■ 22-23

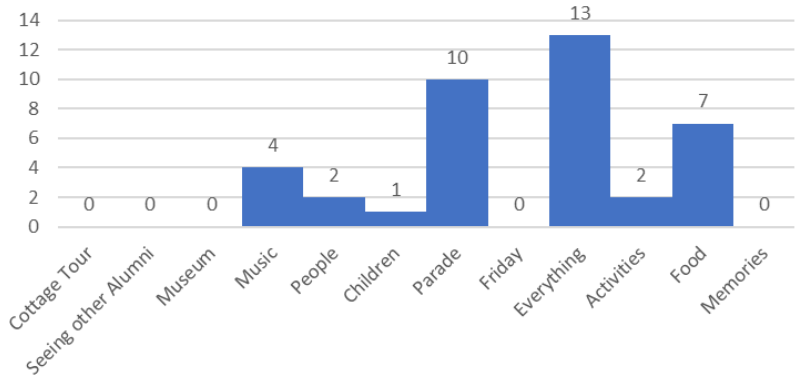
<i>Ethnicity and Gender</i>	Oct	Nov	Dec	Q1 2018 (%)	Q2 2018 (%)	Q3 2018 (%)	Q4 2018 (%)	Q4 2017 (%)	Deferred	Discharged
African-American (total)	5.0	5.0	4.0	46.6%	49.7%	40.6%	41.3%	44.3%	0.0	2.0
Caucasian (total)	6.0	6.0	6.0	43.2%	40.8%	59.4%	53.1%	46.0%	0.0	1.0
Hispanic (total)	0.0	0.0	0.0	0.0%	0.0%	0.0%	0.0%	0.0%	0.0	0.0
Multi-Racial (total)	1.0	1.0	0.0	10.4%	8.8%	0.0%	5.9%	9.9%	0.0	0.0
Male (total)	5.0	5.0	3.0	50.0%	54.4%	43.3%	38.3%	52.5%	0.0	3.0
Female (total)	7.0	7.0	7.0	50.0%	45.6%	56.7%	61.9%	47.6%	0.0	0.0

MASONIC HOMECOMING FESTIVAL SURVEYS

Have you attended a Masonic Homecoming Festival in the past?



What did you enjoy most about the Masonic Homecoming Festival?



- 100% of respondents rated the overall experience as Good, Very Good, or Excellent
- 100% of respondents rated the food as Good, Very Good, or Excellent
- 100% of respondents rated parking as Good, Very Good, or Excellent

<i>How did you find out about the Masonic Homecoming Festival this year?</i>	Number of Respondents
Newspaper	0
TV	0
Poster	2
Word of Mouth	18
Other (Shriner, Mason, Alumni, MHCO website, Facebook, School flyer, Eastern Star)	11

EMPLOYEE EXIT SURVEYS

Eight employees completed exit surveys upon termination, resignation, or retirement.

	Poor	Fair	Good	Excellent
How would you rate the overall programming for children at MHCO?		2	1	4
How would you rate your function within the MHCO system?			4	4
How would you rate the CCW staff at MHCO?		1	2	5
How would you rate the Clinical staff at MHCO?		1	2	5
How would you rate the Recreation staff at MHCO?			3	5
How would you rate the Office staff at MHCO?			2	5
How would you rate the Educational staff at MHCO?			2	5
How would rate the Administration/Executive staff at MHCO?	2	2		3
How would you rate the facilities at MHCO?	1		1	5
How would you rate a child's educational experience at MHCO?		2	1	4
How would you rate the food service or meals at MHCO?			4	3
How would you rate our efforts working with families?		2	3	3
How would you rate the communication flow between staff?	3		4	1
How would you rate the compensation/benefits package at MHCO?			3	5
How would you rate your overall MHCO experience?			3	5
How would you rate the overall level of professionalism at MHCO?			3	5
		Yes	No	
Were you ever threatened or intimidated regarding making complaints or grievances while employed at MHCO?		1	7	
Were you ever denied any of your basic rights as an employee while at MHCO?		1	7	

What did you like most about your tenure here?

Helping the children learn a profession; working with the children, CCWs and staff; people, living area, gym; the kids and the wonderful house parents that work here; the staff are the best and houseparents work hard with these wonderful kids; the family atmosphere; the comradery between houseparents; my relationship with everyone at every level

What did you like least about your tenure here?

Too much change; not being able to help some of the families whose children reside at MHCO; location of MHCO; the very unclear/confusing process of communication on campus; the lack of support towards strict structures within the cottages; being worked full time at part time pay rate

If you could change on thing about MHCO what would it be?

Increase the work with the families to assist them in overcoming the obstacles that prevent them from raising their children; move to location toward the beach; would like to see all houseparents get the same support or fair treatment even if they are verbally passionate, professionally of course. And not all houseparents have the luxury of bringing other couples on board; the open door policy that exists between supervision and the residents. It's very undermining; the focus of the agency truly be on the overall satisfaction of the residents and their family

Are there any other things that you would like to express or to comment about regarding your employment at MHCO?

I truly appreciate all of my experiences here at MHCO, this is a great place for families in need; everyone needs to stay in their lanes. Supervisors manage parents, parents manage cottages. No crossover except in the presence of abuse; I had grievances that I really wanted to deal with before resigning from agency. I would like to advise Administration to truly check in on the satisfaction levels of the clients/ family and the staff across all departments

RESIDENT DISCHARGE SURVEYS

Zero residents completed exit surveys upon discharge.

RESIDENT FAMILY DISCHARGE SURVEYS

One resident family member completed an exit survey upon discharge.

	Poor	Fair	Good	Excellent
How would you rate the CCWs at MHCO?				1
How would you rate the clinicians at MHCO?				1
How would you rate the Recreation staff at MHCO?				1
How would you rate the office staff at MHCO?				1
How would you rate the Education staff at MHCO?				1
How would rate the Administration/Executive staff at MHCO?				1
How would you rate the living facilities at MHCO?				1
How would you rate your child's educational experience at MHCO?				1
How would you rate your child's spiritual experiences at MHCO?				1
How would you rate the food service or meals at MHCO?				1
How would you rate our efforts working with your family?				1
How would you rate the communication you received?				1
How would you rate your child's overall MHCO experience?				1

	Yes	No
Were you given the opportunity to participate in your child's Case Planning?	1	
Were your goals considered for you and your child considered?	1	
Were you invited to participate in campus-wide planned activities?	1	
Were you permitted to date while a resident at MHCO?		1
If you answered NO, why not?		Does not attend school
Were you invited to attend school functions and/or planning sessions	1	
If you answered NO, what weren't you permitted to attend?		
Were you allowed telephone privileges while your child was at MHCO?	1	
Did you feel that you could go to someone and lodge a complaint or grievance without fear of reprisal?	1	
Were you ever threatened or intimidated regarding making complaints while your child was at MHCO?		1
If YES, by whom?		
Were you ever denied any of your basic rights as a parent/guardian by MHCO?		1
Did you have a special person that you believed you could go to if you had a problem and know that they would always help you?	1	

What did you like most about having your child live here?

the staff is so helpful and sweet

What did you like least about having your child live here?

I love everything about MHCO

If you could change one thing about MHCO, what would it be?

no I love everything about MHCO the staff is wonderful and very understanding I love the way they treat my children

GRIEVANCES

In 2018, there was 1 minor unfounded grievance claimed by a resident. There were 0 grievances claimed by other stakeholders.

INCIDENTS

In 2018, there were 52 total incidents reported (17 in the first quarter, 6 in the second quarter, 11 in the third quarter, and 18 in the fourth quarter).

Out of the 52 total incidents reported, 9 were deemed Critical Incidents per licensing and accreditation standards (0 resident restraints, 0 resident runaways over 24 hours, 2 dangerous or endangered residents, 2 resident serious injury or illness resulting in hospitalization, 0 resident deaths, 1 resident arrests, and 4 abuse or neglect reports made by staff to DSS against resident family caregivers).

Out of the 52 total incidents reported, 43 were deemed Non-Critical Incidents per licensing and accreditation standards (8 resident injuries, 4 resident risk of injuries, 4 staff injuries, 0 staff risk of injuries, 0 resident contraband seizures, 6 resident altercations, 0 other altercations, 10 property damage, 0 resident runaways less than 24 hours, 0 external investigations, and 11 other incidents).

FILE REVIEW RESULTS

During the fourth quarter of 2018, 13 open and 2 closed Direct Care files (100% of all current and recently discharged residents) were reviewed. Approximately 73% of reviewed case files needed no corrective action or could not be corrected because they were closed files. Overall for 2018, 100% of Direct Care files have been reviewed.

During the fourth quarter of 2018, 4 open and 0 closed ILP files (100% of all current and recently discharged residents) were reviewed. Approximately 75% of reviewed case files needed no corrective action or could not be corrected because they were closed files. Overall for 2018, 100% of ILP files have been reviewed.

During the fourth quarter of 2018, 15 Direct Care and 4 ILP medical files were reviewed. Approximately 82% of reviewed case files needed no corrective.

IMPROVEMENT PLANS

During the third quarter of 2017, an improvement plan was created to include resident outcome development. The PQI Director has participated in discussions with other children's residential facilities in NC through Benchmarks to collect similar outcome data utilizing common, validated instruments. Additionally, the 2019 PQI Goals and Outcomes will address more outcome data. The improvement plan is being revised to include resident individualized goal achievement measures and reporting.

Improvement plans for 2019 include financial development and CCW retention. A Financial Development planning meeting took place in the fourth quarter 2018 to determine goals and strategies to achieve targets. A marketing plan has been developed to assist in acquisition of new donors, referrals for services, and CCW applications for employment. The 2019 PQI Goals and Outcomes will address more outcome data for both plans.

CONTACT US!

If you have any feedback, questions, or comments about this report, please contact the PQI Director via email or phone:

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